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A Note From Jackie...



As the holidays approach, many of us dust off our baking skills and pull out our tried and true family favorites. For me, a tradition has been holiday pie baking. Growing up, my grandfather's neighbor had several apple trees abutting my grandfather's property. Every fall when I visited, the neighbor would allow me to pick as many apples as I wanted and I'd take them home and bake them into apple pies. From there, I expanded my pie baking repertoire. Over the past few years, the following has become a new family favorite. I found the recipe in a book, but it's namesake, the Snowbird Mountain Lodge, is located right here in North Carolina!

Snowbird Mountain Lodge's Mocha Pecan Pie

1 Single Crust Pie Pastry
3 tbsp. unsweetened cocoa powder
2 tsp. instant coffee granules
3 tbsp. unsalted butter, melted
1 tbsp. heavy or whipping cream
1 cup sugar
1 cup light corn syrup
3 large eggs, at room temperature
2 tsp. vanilla
1/4 tsp. salt
1 1/2 cups coarsely chopped pecans*

1. Preheat oven to 400F. Line pie plate with pastry. Place in freezer for 15 minutes. Partially pre-bake (line with foil, weigh down with pie weights or dried beans and bake at 400F for 15 minutes) and let cool. Reduce oven temperature to 350F.
2. Combine cocoa, coffee, butter, and cream in a large bowl. Whisk to blend. Add sugar, corn syrup, eggs, vanilla and salt. Whisk again until smooth. Stir in pecans. Pour into cooled pie shell. Gently rake fork through filling to distribute nuts evenly.
3. Place pie on the center oven rack and bake for 30 minutes. Rotate pie 180 degrees (so the part that was at back of oven is now at the front of the oven) and continue to cook until filling has puffed around the edge and middle is set. To check, give the pie a quick nudge. The filling should not move in waves below the crusty surface (if it does, bake for another 7-10 minutes).
4. Transfer pie to wire rack and cool thoroughly. Serve at room temperature.

*Pecan halves make for a "prettier" pie, but it will be more difficult to slice. Chopped pecans will make for "cleaner" slices when serving.

Bridges

A newsletter for Carolinians on transitioning family wealth, wisdom and values



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November 2013

Obamacare's Impact to Seniors

Since its passage, the Affordable Care Act, commonly referred to as "Obamacare," has been the subject of many heated debates and a cause for some confusion among most of the population, but especially how it impacts our senior population. Its far-reaching changes have already begun and will continue in the years to come. Here is how it impacts seniors.

Individual Mandate: Most of us have heard that under the ACA there is an individual mandate to obtain healthcare insurance. The mandate takes effect in 2014 and the penalty of not carrying healthcare insurance will be \$95 per adult (\$47.50 per child) or 1% of the family income, whichever is greater. The penalty will rise each year until 2016 when the penalty reaches \$695 or 1% of the family income. For those over 65, this will not be an issue if you enroll in Medicare coverage.

Medicare Changes: Although there will be payment cuts to Medicare, there are key benefits that are absolutely protected under the ACA. Medicare Part A (hospitals, hospice care and some home health services) and Medicare Part B (medical insurance) are protected and may not be cut. The changes under the ACA, according to the National Council on Aging, give seniors even more Medicare benefits.

Changes to Prescription Drug Coverage—The new healthcare law decreases the expenditure on prescription drugs for Medicare recipients. Prior to the law being enacted, Medicare recipients were subject to what has become commonly known as the "Donut Hole." Simply put, the Medicare law previously required recipients to reach a \$310 deductible prior to Medicare kicking in to assist. At that point, enrollees starting paying 25% of the drug cost until they reached a total expenditure of \$2800. The drug expense from \$2800 to \$4550 was then paid 100% by the enrollee. Once drug expenses reached \$4550 Medicare would kick in again and the enrollee would pay only a small percentage of the prescription at that point. The Affordable Care Act has enacted a provision that requires Medicare to pick up more of the tab and will close the "donut hole" by the year 2020. Eventually, Medicare recipients will pay 25% of all prescription drugs across the board.

Preventive Care Expanded—Another benefit to seniors under the Affordable Care Act is an increase in preventive care coverage. The ACA requires that Medicare cover preventive care procedures and

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Obamacare's Impact to Seniors *(continued from Page 1)*

screenings in an effort to reduce possible necessary future treatment. Prior to the ACA, Medicare did not cover preventive services. Such services include flu shots, tobacco use cessation counseling, cancer screenings, diabetes screenings and screenings for other chronic diseases. In addition, seniors are allowed an annual wellness visit. Previously, these services, whether recommended or not, were paid out of the patient's own pocket.

Changes to Medicare Advantage Plans—When a senior enrolls in Medicare, he or she may choose the traditional Medicare coverage plan or may seek what is called a Medicare Advantage Plan. The Medicare Advantage Plans have their own terms of coverage. They usually cover services not traditionally covered by Medicare such as dental or vision, but may, at the same time, require co-pays or cost-sharing fees for services covered at no out-of-pocket expense under traditional Medicare.

The ACA prohibits Medicare Advantage Plans from charging higher cost-sharing fees for seniors receiving chemotherapy and dialysis. In addition, it limits the amount of expenditures of other than medical services for enrollees. In other words, the Medicare Advantage Plans are now limited as to the amount they may spend on administrative, marketing and other non-medical expenses. While certain additional covered services under these plans may be eliminated, certain required benefits are prohibited from being cut. Presently, 1 in 4 seniors is enrolled in a Medicare Advantage Plan.

Non-Medicare Changes: In addition to Medicare changes that certainly affect seniors, there are other changes written into the law that should be noted as well. Most of these would be considered beneficial to seniors.

No pre-existing and conditions clauses—All health insurance carriers are prohibited from including pre-existing conditions clauses in their plans. This means that health cannot be a factor when applying for health care coverage. Furthermore, insurance companies are prohibited from charging individuals varying amounts for coverage based on their health, sex, age or other commonly-considered factors. In addition to those factors that may not be taken into consideration upon applying for coverage, there is also the protection of consumers once they are enrolled in the plan. The healthcare law says that once enrolled in a plan, the insurance company may

not dis-enroll a person for becoming ill.

Grants to Hospitals—The ACA incentivizes hospitals to take extra care of seniors by providing grants to them for working with seniors who are at high risk for frequent hospital readmissions.

The Elder Justice Act—Aimed at protecting seniors from crimes and abuse including physical and mental abuse and financial exploitation. This was enacted under the ACA.

Nursing Home Care Changes—There are several provisions under the ACA concerning nursing homes. For example, the ACA requires the Center for Medicare and Medicaid Services to provide a comprehensive website where consumers may find information regarding local nursing homes, including inspection and complaint reports. The law has made changes meant to make it easier to file complaints about the quality of care within the nursing home and prohibits retaliation for filing such a complaint. Further, in the event a nursing home decides to close its doors, the ACA imposes new, expanded notice requirements for its residents. Finally, the ACA provides all states with the option to enroll in federal grants to pay for criminal background checks on more staff working at the nursing home. This is an optional program left to the discrepancy of each state.

Community Based Long Term Services and Supports—The ACA aims to strengthen the emphasis on home and community-based care by giving states several options to expand such programs for Medicaid enrollees. There are three voluntary provisions for the expansion of home and community-based services under Medicaid. Again, these are optional programs left to the discrepancy of each state.

Conclusion: Clearly there are many changes made by the Affordable Care Act that will affect seniors and their loved ones. It's important to have an understanding of what seniors are facing in terms of their health care coverage. Our firm is dedicated to helping seniors and their loved ones work through these issues and implement sound legal planning to address them. If we can help in any way, please don't hesitate to contact our office.

HOWDY PILGRIM!
We don't like to toot our own horn,
but we've got a CORNUCOPIA of
"GOURD" information at the
**Estate & Long Term Care
Essentials Workshop!**
Tues. Nov. 26th at 10 a.m.
Thur. Dec. 5th at 6:30 p.m.



So...Bring your Whole Flock
and get ready to
GOBBLE GOBBLE GOBBLE
up tasty bits on trusts,
wills, powers of attorney
and more! We knock the
STUFFING out of tradi-
tional estate planning and
you can too!

I'm glad we signed up
for the FREE WORK-
SHOP! The time flew
by, we learned new
things, AND we had a
little fun along the way!

And don't forget the
special snacks!
PIE...YUM!!!



Don't be a TURKEY!
Sign up Today!!!
Seating is limited. Call
919-443-3035
to reserve your seat
now!!!

Thank YOU for introducing your friends & family to our office!

We invest 100% of our time and energy to delivering first-class service to our clients. As a result, our valued clients, partners, and friends refer their family, friends and associates to us. We'd like to take a moment to thank the following individuals:

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